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CONFIRMATION NO. 1440

|                             |                                                |              |                        |                                              |
|-----------------------------|------------------------------------------------|--------------|------------------------|----------------------------------------------|
| SERIAL NUMBER<br>10/667,309 | FILING OR 371(c)<br>DATE<br>09/17/2003<br>RULE | CLASS<br>370 | GROUP ART UNIT<br>2616 | ATTORNEY DOCKET<br>NO.<br>Flarion-56APP (83) |
|-----------------------------|------------------------------------------------|--------------|------------------------|----------------------------------------------|

## APPLICANTS

Alan O'Neill, Henley Beach, AUSTRALIA;

## \* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/411,722 09/18/2002

## \* FOREIGN APPLICATIONS \*\*\*\*\*

F REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
12/12/2003

|                                                                                                 |                                                                                                                                                     |                                  |                        |                       |                            |
|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no | 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR<br>COUNTRY<br>AUSTRALIA | SHEETS<br>DRAWING<br>8 | TOTAL<br>CLAIMS<br>34 | INDEPENDENT<br>CLAIMS<br>4 |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials <i>MS</i>         |                                                                                                                                                     |                                  |                        |                       |                            |

## ADDRESS

26479

## TITLE

Methods and apparatus for using a care of address option

|                                |                                                                                                                   |                                                                                                                                                                                                                                                                                  |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE<br>RECEIVED<br>1238 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17. Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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